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8	UNITED STATES DISTRICT COURT		
9	NORTHERN DISTRICT OF CALIFORNIA		
10	0V 00 * 111A		
11	EDWINS TORRES ON CASE NO. 1114		
12	vs. ) PRISONER'S		
13	APPLICATION TO PROCEED IN FORMA PAUPERIS		
14	Defendant.		
15			
16	I, EDWIN J. TORRES, declare, under penalty of perjury that I am the		
17	plaintiff in the above entitled case and that the information I offer throughout this application		
18	is true and correct. I offer this application in support of my request to proceed without being		
19	required to prepay the full amount of fees, costs or give security. I state that because of my		
20	poverty I am unable to pay the costs of this action or give security, and that I believe that I am		
21	entitled to relief.		
22	In support of this application, I provide the following information:		
23	1. Are you presently employed? Yes No		
24	If your answer is "yes," state both your gross and net salary or wages per month, and give the		
25	name and address of your employer:		
26	Gross:		
27	Employer:		
28			

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. 1	If the answer is "no," state the date of last employment and the amount of the gross and net			
2	salary and w	vages per month which you received. (If y	ou are imprisoned, specify the last	
3	place of emp	ployment prior to imprisonment.)	<i>(</i>	
4	AIG	SUNAMBRICA 2003	(5,000 / month)	
5		· · · · · · · · · · · · · · · · · · ·	···	
. 6				
7	2. Have you received, within the past twelve (12) months, any money from any of the			
8	following so	ources:		
9	a.	Business, Profession or	Yes No <u> </u>	
10		self employment		
11	b.	Income from stocks, bonds,	Yes No <b>&gt;</b>	
12		or royalties?		
13	c.	Rent payments?	Yes No	
14	d.	Pensions, annuities, or	Yes No ×	
15		life insurance payments?		
16	e.	Federal or State welfare payments,	Yes No X	
17		Social Security or other govern-		
18		ment source?		
19	If the answer is "yes" to any of the above, describe each source of money and state the amount			
20	received fron	n each.		
21		N/A		
22				
23	3. Are y	ou married?	Yes No X	
24	Spouse's Full	Name:		
25	Spouse's Plac	ce of Employment:		
26	•	nthly Salary, Wages or Income:		
27	Gross \$	Net \$	NA	
28	4. a.	List amount you contribute to your spou	se's support:\$	
	אסמת שבו שונים מונים	S IN EODMA DATIDEDIS Case No 2 -	,	

1	b. List the persons other than your spouse who are dependent upon you for		
2	support and indicate how much you contribute toward their support. (NOTE:		
3	For minor children, list only their initials and ages. DO NOT INCLUDE		
4	THEIR NAMES.).		
5	NA		
6			
7	5. Do you own or are you buying a home? Yes No		
8	Estimated Market Value: \$ \( \scale \) Amount of Mortgage: \$ \( \scale \)		
9	6. Do you own an automobile? Yes No		
10	Make W/A Year W/A Model W/A		
11	Is it financed? Yes No If so, Total due: \$		
12	Monthly Payment: \$		
13	7. Do you have a bank account? Yes No (Do not include account numbers.)		
14	Name(s) and address(es) of bank:		
15			
16	Present balance(s): \$		
17	Do you own any cash? Yes No X Amount: \$		
18	Do you have any other assets? (If "yes," provide a description of each asset and its estimated		
19	market value.) Yes No X		
20			
21	8. What are your monthly expenses?		
22	Rent: \$ Utilities:		
23	Food: \$ Clothing:		
24	Charge Accounts:		
25	Name of Account Monthly Payment Total Owed on this Account		
26	NONE \$ & \$		
27	\$ \$ \$ \$		
28			

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1	9. Do you have any other debts? (List current obligations, indicating amounts and to		
2	whom they are payable. Do <u>not</u> include account numbers.)		
3	NONE		
. 4			
5	·		
6	10. Does the complaint which you are seeking to file raise claims that have been presented		
7	in other lawsuits? Yes No X		
8	Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in		
9	which they were filed.		
10	N/A		
11			
12	I consent to prison officials withdrawing from my trust account and paying to the court		
13	the initial partial filing fee and all installment payments required by the court.		
14	I declare under the penalty of perjury that the foregoing is true and correct and		
15	understand that a false statement herein may result in the dismissal of my claims.		
16			
17	DATE SIGNATURE OF APPLICANT		
18			
19			
20	Case Number:		
21			
22			
23			
24			
-25			
26			
27			
28			

1 CERTIFICATE OF FUNDS 2 IN 3 PRISONER'S ACCOUNT 4 5 I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of <u>TORRES</u> 6 7 at 8 [prisoner name] ALAMEDA COUNTY TAIL where (s)he is confined. 9 10 [name of institution] 11 I further certify that the average deposits each month to this prisoner's account for the 12 most recent 6-month period were \$\_\_\_ \_\_ and the average balance in the prisoner's 13 account each month for the most recent 6-month period was \$\_ 14 Dated: 1-2908 15 16 [Authorized officer of the institution] 17 18 19 20 21 22 23 24 25 26 27 28

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MR. EDWIN J TORRES 6DJ ULK-162, 2B4 550 6D STREET OPXINNO, CA 14607

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> CLERK FOR THE 450 BOX SAN

FOR THE UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA
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